FORMFD Mail Processing -ention

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

AIG 13 2008

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FORM D

vvasnington, DC NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

OMB APPROVAL

OMB Number: Expires: August 31,2008

Estimated average burden hours per response.....16.00

SEC USE ONLY									
Prefix		Serial							
!									
DATE RECEIVED									
		·							

UNIFORM LIMITED OFFERING EXEM	FIION L
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Subordinated Convertible Promissory Note and Warrant Offering	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
Type of timing.	4.1960) BERBER BERB
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08038110
ImageTree Corporation	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
The United Center, Suite 390, 1085 Van Voorhis Road, Morgantown, WV 26505	(304) 599-4260
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	(F)
Forestry Inventory Analysis	' 5
Type of Business Organization Corporation Imited partnership, already formed other (p	please specify): PROCESSED
business trust limited partnership, to be formed	· NOCESSED
Month Year	AUG 21 2008
Actual or Estimated Date of Incorporation or Organization: 111 015 Actual Estimated Date of Incorporation or Organization: 111 015	mateu
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON REUTERS
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manuall photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repothereto, the information requested in Part C, and any material changes from the information previously supplied by filed with the SEC.	
Filing Fee: There is no federal filing fee.	•
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

			A. BASIC IDE	NTH	FICATION DATA				
2. Enter the information re	quested for the fol	lowin	g:						
• Each promoter of the	he issuer, if the iss	suer ha	as been organized wi	thin t	the past five years;				
Each beneficial own	ner having the pow	er to v	ote or dispose, or dire	ect th	e vote or disposition (of, 10	% or more o	f a clas	s of equity securities of the issuer.
Each executive offi	cer and director o	f corp	orate issuers and of	corpo	rate general and man	aging	partners of	partne	rship issuers; and
Each general and m	nanaging partner o	f partr	nership issuers.						
Chook Doy(as) that Apply	Dromotor.		Page Gaigl Owner	_	Evacutiva Officer	_	Director		General and/or
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		Managing Partner
Full Name (Last name first, if Novitas Capital III, L.P.	findividual)								
Business or Residence Addres 1200 Liberty Ridge Drive				de)					
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	findividual)								
Battelle Ventures, L.P.									
Business or Residence Addres	s (Number and	Street	, City, State, Zip Co	de)					
103 Carnegie Center, Suit	e 100, Princetoi	n, NJ	08540						
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, it Nissenbaum, Scott	f individual)					•			
Business or Residence Addres	ss (Number and	Street	, City, State, Zip Co	de)					
c/o Novitas Capital III, L.P	., 1200 Liberty I	Ridge	Drive, Suite 310,	Way	yne, PA 19087				
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, if	f individual)								
Collins, Morton									
Business or Residence Addres c/o Battelle Ventures, L.P			, City, State, Zip Co ter, Suite 100, Pri		on, NJ 08540				•
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, it Clutter, Michael	individual)								
Business or Residence Addres					Voorhis Road, M	organ	ntown, WV	/ 2650	05
Check Box(es) that Apply:	Promoter	\Box	Beneficial Owner		Executive Officer	<u></u>	Director		General and/or
									Managing Partner
Full Name (Last name first, it Garland, Robert	findividual)				•				
Business or Residence Addres c/o ImageTree Corporation					ı Voorhis Road, M	orga	ntown, W\	/ 2650	05
Check Box(es) that Apply:	Promoter		Beneficial Owner	Z	Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, if Redlus, Mark	individual)				***************************************				
Business or Residence Addres	•		•		Voorhis Road, Mo	orgar	ntown, WV	2650	5
	(Use blan	nk she	et, or copy and use a	ıdditi	onal copies of this sh	eet, a	s necessary)	

		A. BASIC ID	ENTIFICATION DATA		
2. Enter the information re	quested for the fo	llowing:			
 Each promoter of t 	he issuer, if the is	suer has been organized w	vithin the past five years;		
Each beneficial own	ner having the pow	ver to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
 Each executive off 	icer and director o	f corporate issuers and of	corporate general and mai	naging partners of	partnership issuers; and
 Each general and n 	nanaging partner o	of partnership issuers.	. •		
Charle Bassian Aban Abanis		□ P6-i-1 0		D Discours	Conseil and the
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Fulton, George	f individual)				
Business or Residence Addre c/o ImageTree Corporation		Street, City, State, Zip Co Center, Suite 390, 108		lorgantown, WV	26505
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Pliszka, Robert					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
c/o ImageTree Corporation	n, The United C	enter, Suite 390, 1085	Van Voorhis Road, Mo	organtown, WV :	26505
Check Box(es) that Apply:	Promoter	Beneficial Owner	Z Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, in Coleman, Mike	f individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Address	ss (Number and	Street, City, State, Zip Co	ode)		
c/o ImageTree Corporatio	n, The United C	enter, Suite 390, 1085	Van Voorhis Road, M	organtown, WV	26505
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Schreiber, Steven			•		
Business or Residence Addres	ss (Number and	Street, City, State, Zip Co	ode)		
c/o ImageTree Corporation	on, The United (Center, Suite 390, 108	5 Van Voorhis Road, M	lorgantown, WV	26505
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Anderson, Chuck	f individual)				
Business or Residence Addres c/o ImageTree Corporation				lorgantown, WV	26505
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and	Street, City, State, Zip Co	ode)	· · · · · · · · · · · · · · · · · · ·	
	(Use blan	nk sheet, or copy and use	additional copies of this s	heet, as necessary)	

Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual)						В. 13	NFORMAT	ION ABOU	T OFFERI	NG				
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?	1	Has the	issuer sole	d or does t	he issuer i	ntend to se	ll. to non-a	ccredited i	nvestors ir	this offer	ing?			
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar rememeration for solicitation of purchasers in connection with sales of securities in the offering. If a person to the listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be bisted are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	••									•	<u> </u>			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remneration for solicitation of purchasers in connection with sales of securities in like offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. Throw than five (5) persons to be blisted are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers · (Check "All States" or check individual States) — All States AL AK AZ AR CA CO CT DE DC FL CA HI DD ARI MIN MIN MIN MIN MIN MIN MIN MIN MIN MI	2.	· · · · · · · · · · · · · · · · · · ·								\$ <u>18,</u>	750.00			
4. Enter the information requested for each person who has been or will be paid or given, directly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated persons or agent of a broker or dealer resistence with the SEC and/or with state or states, list the name of the broker or dealer. J. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	2	Doogath	a affarina	manusia lain	· aumarchi	n of a since	la unit?							
commission or similar remuneration for solicitation of purchasers in connection with sales of Securities in the Offering. If a person to be listed is an associated persons or agen of a Torker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			_	•									_	
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Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Ful	ll Name (Last name	first, if ind	ividual)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bu	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Lip Code)						
All States All	Nai	me of As	sociated B	roker or De	aler									
AL AK AZ AR CA CO CT DE DC FL GA HI ID II. IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Sta	tes in WI	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
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Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														·
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Ful	ll Name (Last name	first, if ind	ividual)			-						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bu	siness or	Residence	Address (1	Number an	id Street, C	City, State,	Zip Code)						
(Check "All States" or check individual States)	Nai	me of As	sociated B	roker or De	aler									
AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR- Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States	Sta	tes in WI	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
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MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Ful	ll Name (Last name	first, if ind	ividual)	-				 -				
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bu	siness or	Residence	: Address (?	Number an	d Street, C	City, State,	Zip Code)						
(Check "All States" or check individual States) All States AL AK AZ AR CA CO CT DE DC FL GA HI ID	Nai	me of As	sociated B	roker or De	aler		·						···	<u> </u>
(Check "All States" or check individual States) All States AL AK AZ AR CA CO CT DE DC FL GA HI ID	Sta	tes in WI	sich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	214	_											☐ AI	l States
[[[[[[[[[[[[[[[[[[[_									
IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR		MT	NE	NV	(NH)	NJ	NM	NY	NC	ND	ОН	OK	OR	PA

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\) and indicate in the columns below the amounts of the securities offered for exchange and		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	c 0.00	s 0.00
	Equity		§ 0.00
	Common Preferred	•	. В
	Convertible Securities (including warrants)	3,500,000.00	375,000.00
	Partnership Interests		\$ 0.00 ·
	Other (Specify)		\$ 0.00
			<u> </u>
	Total	<u> </u>	\$_0,000.00
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 375,000.00
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)	0	\$ <u>0.00</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	T	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_20,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify) State filing fees	[7]	§ 675.00
	Total		c 20.675.00

	b. Enter the difference between the aggregate off and total expenses furnished in response to Part C-proceeds to the issuer."	 Question 4.a. This difference is the "adjuste 	d gross	\$3,479,325.00			
5.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Pe	any purpose is not known, furnish an estime of the payments listed must equal the adjuste	ate and				
			Payments to Officers, Directors, & Affiliates	Payments to Others			
	Salaries and fees		-	_			
	Purchase of real estate						
			П (пε			
		chase, rental or leasing and installation of machinery equipment equipment equipment equipment equipment equipment equipment of plant buildings and facilities equipment equipme					
	Acquisition of other businesses (including the voffering that may be used in exchange for the as	value of securities involved in this seets or securities of another	_	- -			
	Repayment of indebtedness						
	Other (specify):						
			🗆 \$				
	Column Totals		s <u>0.00</u>	\$_3,449,325.00			
	Total Payments Listed (column totals added)		s <u>3</u>	,449,325.00			
*	The state of the s	D. FEDERAL SIGNATURE					
he	e issuer has duly caused this notice to be signed by t nature constitutes an undertaking by the issuer to f information furnished by the issuer to any non-a	urnish to the U.S. Securities and Exchange (coredited investor pursuant to paragraph (b)	Commission, upon writt (2) of Rule 502.				
	uer (Print or Type)	Signature	Date				
	ageTree Corporation	Stall	August 8, 2008				
	me of Signer (Print or Type)	Title of Signer (Print or Type)					
d٥	ven V. Schreiber	Vice President of Finance					

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 p provisions of such rule?			Yes	No K
	Sec	e Appendix, Column 5, for state res	ponse.		
2.	The undersigned issuer hereby undertakes to D (17 CFR 239.500) at such times as requir		any state in which this notice is f	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to issuer to offerees.	o furnish to the state administrators	, upon written request, informat	ion furn	ished by the
4.	The undersigned issuer represents that the is limited Offering Exemption (ULOE) of the s of this exemption has the burden of establis	state in which this notice is filed and	understands that the issuer clai		
	uer has read this notification and knows the cont thorized person.	tents to be true and has duly caused th	nis notice to be signed on its beha	lf by the	undersigned
lssuer (Print or Type)	Signature /	Date		
ImageT	ree Corporation	Sell	August 8, 2008		
Name (Print or Type)	Title (Print or Type)			

Vice President of Finance

Instruction:

Steven V. Schreiber

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 4 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited investors in State offered in state amount purchased in State waiver granted) (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Accredited Non-Accredited Investors Yes No State Yes No **Investors** Amount Amount AL AK AZAR CA CO CTDE DC FL GA НΙ 1D ΙL IN IA KS KYLA ME MD MA ΜI MN MS

APPENDIX

1		2	3			4	-	5 Disqual	:c:-
	to non-a	to sell ccredited s in State -Item !)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО			·						
МТ									
NE									
NV									
NH									
NJ		×	Convertible Note & Warrant - \$3.5m	1 .	\$187,500.00	0	\$0.00		×
NM									
NY									
NC									i
ND									
ОН								<u></u>	
ОК									
OR		<u> </u>							
PA		×	Convertible Note & Warrant - \$3,5m	1	\$168,750.00	0	\$0.00		×
RI									
SC					-	-			
SD									
TN		×	Convertible Note & Warrant - \$3.5m	1	\$18,750.00	0	\$0.00	<u> </u>	×
TX			·				<u></u>		
UT				:					
VT									
VA					-				
WA									<u> </u>
WV									
WI									

	APPENDIX														
1		2	3		4										
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Type of investor and explain amount purchased in State waiv		Type of investor and exp amount purchased in State wait		amount purchased in State		(if yes, explan waiver	ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No						
WY															
PR															

 ${\it END}$